

HOUSE No. 4859

The Commonwealth of Massachusetts

By Mr. Murphy of Burlington, for the committee on Ways and Means, on House, No. 4668, a Bill relative to post-partum depression (House, No. 4859). July 6, 2010.

FOR THE COMMITTEE:

NAME:	DISTRICT/ADDRESS:
Charles Murphy	21st Middlesex

The Commonwealth of Massachusetts

In the Year Two Thousand and Ten

An Act RELATIVE TO POST-PARTUM DEPRESSION.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Chapter 175 of the General Laws is hereby amended by inserting after section 47Z the following section:-

Section 47AA. A health insurance company licensed to do business in the commonwealth shall submit an annual report on its activities with respect to screening for postpartum depression. The report shall be filed at the end of each state fiscal year with the commissioner of public health and the clerks of the house of representatives and the senate. Following receipt of the reports, the commissioner of public health shall issue an annual summary of the reports, including highlighting best practices and effective policies.

SECTION 2. The department of public health may consult with health care providers, non-profits and health insurance providers regarding postpartum depression to develop a culture of awareness, destigmatization and screening for perinatal depression so that residents of the commonwealth may be assured of the most effective and affordable provision of public health services possible. The department of public health shall make perinatal depression a public health priority, and in consultation with the special commission on postpartum depression, established in section 3, the department may develop regulations, policies and resources to address postpartum depression including, but not limited to, public and professional education curricula, plans and materials; referral lists that build on existing resources; and the authorization of validated screening tools.

SECTION 3. (a) There shall be a special commission on postpartum depression to provide guidance and advice to the governor, the general court and the secretary of health and human services on current research on postpartum depression, including, but not limited to, best and promising practices in the prevention, detection and treatment of postpartum depression and to recommend policies, including legislation, to promote greater public awareness, screening and treatment of postpartum depression. The special commission may conduct public hearings, forums or meetings to gather information and to raise awareness of postpartum depression, including the sponsorship of or participation in statewide or regional conferences.

(b) The commission shall be comprised of the following members: 4 members of the senate, 3 of whom shall be members of the majority party appointed by the president of the senate, 1 of whom shall serve as co-chair, and 1 of whom shall be a member of the minority party appointed by the minority leader; 4 members of the house of representatives, 3 of whom shall be members of the majority party appointed by the speaker of the house of representatives, 1 of whom shall serve as co-chair, and 1 of whom shall be a member of the minority party appointed by the minority leader; 1 of whom shall be a representative of the Massachusetts chapter of the National Association of Social Workers; 1 of whom shall be appointed jointly by the Massachusetts Midwives Association and the Massachusetts Affiliate of the American College of Nurse Midwives who shall be a midwife licensed to practice in the commonwealth; 1 of whom shall be a representative from the Nurses United for Responsible Services who shall be an advance practice psychiatric nurse; 1 of whom shall be a representative from the Massachusetts Coalition of Nurse Practitioners who shall be a nurse practitioner; 1 of whom shall be a representative of the Massachusetts Psychological Association who shall be a psychologist; 1 of whom shall be a representative from the children's behavioral health advisory council established in section 16Q of chapter 6A of the General Laws; 1 of whom shall be a representative from the Massachusetts Behavioral Health Partnership or a managed care organization or managed care entity contracting with MassHealth; 5 of whom shall be representatives of the Massachusetts Medical Society appointed in consultation with their relevant specialty chapters including a pediatrician, an obstetrician, a family physician, a psychiatrist and a child and adolescent psychiatrist; 2 of whom shall be appointed by the co-chairs of the commission 1 of whom is a woman who has experienced postpartum depression and 1 one of whom is a representative from a regionally-based nonprofit group currently serving women suffering from postpartum depression; 4 of whom shall be appointed by the commissioner of insurance with at least 1 representative from the Massachusetts Association of Health Plans and 3 representatives from commercial health insurance carriers or managed care organizations doing business in the commonwealth; and no more than 2 additional members appointed by the co-chairs of the commission. The following 6 persons shall serve as ex officio members: the commissioner of the department of public health; the commissioner of the department of mental health; the commissioner of insurance; the commissioner of the department of children and families; the commissioner of early education and care; and the director of Medicaid, or their designees.

(c) The organizational meeting of the commission shall be convened by the co-chairs not later than 60 days after the effective date of this act whether or not all of its members have been appointed.

(d) The special commission shall make an investigation and study of postpartum depression, including, but not limited to: (i) an assessment of current research on the subject and whether there exist evidence-based, best or promising practices on the prevention, detection or treatment of postpartum depression; (ii) a review of current policies and practices with respect to screenings for postpartum depression, including frequency, locations, who administers screenings, the availability of reimbursement and issues surrounding medical necessity and third-party coverage; (iii) assist the department of public health, other state agencies and organizations in the development of professional and public educational materials and programs on postpartum depression, in the development of referral lists for postpartum depression treatment, building on existing resources and in the designation of authorized validated screening tools; (iv) assist the department of public health, other state agencies and organizations with respect to applications for federal funding to support efforts consistent with the mission and purpose of the

67 commission; and (v) any other matters that the special considers relevant to the fulfillment of its mission
68 and purpose.

69 (e) The special commission shall file an annual report at the end of each state fiscal year with the
70 governor and the clerks of the house of representatives and the senate, who shall forward the same to the
71 joint committee on public health and the joint committee on financial services, along with
72 recommendations, if any, together with drafts of legislation necessary to carry those recommendations
73 into effect. The special commission may file such interim reports and recommendations as it considers
74 appropriate.